


<b>FORM 5A</b> Rev 02/08	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table> Document Number:  <div style="border: 1px solid black; padding: 5px; text-align: center;">1636081</div>	DE	ET	OE	ES
DE	ET	OE	ES				
<b>COMPLETED INTERVAL REPORT</b>							
<p>The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.</p>							
1. OGCC Operator Number: <u>100185</u> 2. Name of Operator: <u>ENCANA OIL &amp; GAS (USA) INC</u> 3. Address: <u>370 17TH ST STE 1700</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-56</u>		4. Contact Name: <u>JANE WASHBURN</u> Phone: <u>(720) 876-5431</u> Fax: <u>(720) 876-6431</u>					
5. API Number <u>05-123-22840-00</u> 7. Well Name: <u>ARISTOCRAT ANGUS</u> 8. Location: QtrQtr: <u>NWSW</u> Section: <u>10</u> Township: <u>3N</u> Range: <u>65W</u> Meridian: <u>6</u> 9. Field Name: <u>ARISTOCRAT</u> Field Code: <u>2925</u>		6. County: <u>WELD</u> Well Number: <u>1-6-10</u>					
<u>Completed Interval</u>							
FORMATION: <u>NIOBRARA-CODELL</u>		Status: <u>PRODUCING</u>					
Treatment Date: <u>02/15/2011</u>		Date of First Production this formation: _____					
Perforations Top: <u>6912</u>	Bottom: <u>7224</u>	No. Holes: _____	Hole size: _____				
Provide a brief summary of the formation treatment:		Open Hole: <input type="checkbox"/>					
NBRR - FRAC W/139,608 GAL FRAC FLUID AND 250,020 # SAND. CDL - FRAC W/122,556 GAL FRAC FLUID AND 248,447 # SAND.							
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
<b>Test Information:</b>							
Date: <u>03/30/2011</u>	Hours: <u>24</u>	Bbls oil: <u>27</u>	Mcf Gas: <u>334</u> Bbls H2O: <u>17</u>				
Calculated 24 hour rate:		Bbls oil: <u>27</u>	Mcf Gas: <u>334</u> Bbls H2O: <u>17</u> GOR: <u>12</u>				
Test Method: <u>FLOWING</u>	Casing PSI: <u>627</u>	Tubing PSI: <u>352</u>	Choke Size: <u>16/64</u>				
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>1</u>	API Gravity Oil: <u>63</u>				
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>7188</u>	Tbg setting date: <u>03/23/2011</u>	Packer Depth: _____				
Reason for Non-Production: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>							
Date formation Abandoned: _____		Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____					
Bridge Plug Depth: _____		Sacks cement on top: _____					
Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>							

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: JANE WASHBURN

Title: ENGINEERING TECH Date: 5/9/2011 Email JANE.WASHBURN@ENCANA.COM  
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### **Attachment Check List**

Att Doc Num	Name
1636081	FORM 5A SUBMITTED
1636082	WELLBORE DIAGRAM

Total Attach: 2 Files

### **General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)